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Applicant	:	Edwin C. Iliff)	Group Art Unit 3626
)	
App. No.	:	09/785,044)	
)	
Filed	:	February 14, 2001)	
)	
For	:	AUTOMATED DIAGNOSTIC)	
		SYSTEM AND METHOD)	
		INCLUDING REUSE OF)	
		DIAGNOSTIC OBJECTS)	
)	
Examiner	:	Robert W. Morgan)	

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Enclosed is form PTO-1449 listing references that are also enclosed. This Information Disclosure Statement is being filed before the mailing date of a final action under 37 C.F.R. § 1.113 and before the mailing date of a Notice of Allowance under § 1.311. A certification under 37 C.F.R. § 1.97(e) is set forth below. Thus, no fee is required as set forth in 37 C.F.R. § 1.97(c).

I hereby certify that no item of information contained in this Statement was cited in a communication from a foreign Patent Office in a counterpart foreign application, or, to my knowledge after making reasonable inquiry, was known to any individual designated in 37 C.F.R.

Appl. No. : 09/785,044
Filed : February 14, 2001

§ 1.56(c) more than 30 days prior to the filing of this Information Disclosure Statement.

Respectfully submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: May 9, 2002

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FORM PTO-1449

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICEATTY. DOCKET NO.
ILIFF.015A6APPLICATION NO.
09/785,044INFORMATION DISCLOSURE STATEMENT
BY APPLICANT

USE SEVERAL SHEETS IF NECESSARY)

APPLICANT
Edwin C. IliffCOPY OF PAPERS
ORIGINALLY FILEDFILING DATE
February 14, 2001GROUP
3626

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE (IF APPROPRIATE)
	1.	5,794,208	08/11/98	Goltra			
	2.	5,802,495	09/01/98	Goltra			
	3.	5,812,984	09/22/98	Goltra			
	4.	5,823,949	10/20/98	Goltra			

FOREIGN PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
							YES	NO

EXAMINER INITIAL	OTHER DOCUMENTS (INCLUDING AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.)	

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EXAMINER	DATE CONSIDERED
*EXAMINER: INITIAL IF CITATION CONSIDERED. WHETHER OR NOT CITATION IS IN CONFORMANCE WITH MPEP 609; DRAW LINE THROUGH CITATION IF NOT IN CONFORMANCE AND NOT CONSIDERED, INCLUDE COPY OF THIS FORM WITH NEXT COMMUNICATION TO APPLICANT.	